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CONFIRMATION NO. 3794

SERIAL NUMBER 10/626,486	FILING OR 371(c) DATE 07/24/2003 RULE 1.47	CLASS 128	GROUP ART UNIT 3738	ATTORNEY DOCKET NO. SRGLT.004RA	
APPLICANTS Jui-Teng Lin, Oviedo, FL; ** CONTINUING DATA ***** This application is a REI of 09/189,609 11/10/1998 PAT 6,263,879 ** FOREIGN APPLICATIONS *****					
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged _____ Examiner's Signature _____ Initials _____		STATE OR COUNTRY FL	SHEETS DRAWING 3	TOTAL CLAIMS 23	INDEPENDENT CLAIMS 2
ADDRESS 20995					
TITLE Treatment of presbyopia and other eye disorders using a scanning laser system					
FILING FEE RECEIVED 520	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		